



Long-term neuropsychologic outcome in children diagnosed with low-grade astrocytoma



Central nervous system tumors in children have a relatively high frequency. They are the second most common form of cancer in childhood only exceeded by acute lymphoblastic leukemia. However, prognosis is more severe and at present more children die because of CNS tumor than of ALL.

Astrocytomas account for approximately one third of pediatric central nervous system tumors. They are classified according to increasing malignancy grade as pilocytic, fibrillary, and anaplastic astrocytoma. The first-choice treatment for low-grade astrocytoma is complete surgical resection.

The long-term survival for children with low-grade astrocytoma is approximately 90% after four years, whereas survival for patients in individual series of cerebellar pilocytic astrocytoma with gross total resection may be 90 to 100%. Their quality of life is usually seen as "fares well". They attend school and will participate in professional work. However, how they "fare" in real life at long-term is largely unknown.

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